

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/607752
APPLICANT(S)

FILING DATE

CLAIMS					
	AS FILED		AFTER 1ST AMENDMENT		
	IND	DEP	IND	DEP	
1					
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100					
TOTAL IND.	2		3		
TOTAL DEP.	29		30		
TOTAL CLAIMS	31		33		